24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	d on
TE II Nove of Boose	
Full Name of Payee The Prosper Group Corporation	Date of Public Distribution/Dissemination
Mailing Address 435 East Main Street	11 03 2016
Suite 250	Amount
City State Zip Code	25000.00
Greenwood IN 46143	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	11 03 7 2016
Name of Federal Candidate Support Office	e Sought: House District: 03
Mowrer, Jim, , , Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary ★ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Dishusanant or Obligation
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Galorida Todi To Balo	oursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	25000.00
Company of the Compan	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	25000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
24.0	11 04 2016
Signature	